Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF MICHIGAN		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	☐ Check if t amended

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Margery First name Lee Middle name Wakefield Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8200	

Debtor 1 Margery Lee Wakefield

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	6086 Taylor Court	If Debtor 2 lives at a different address:
		Haslett, MI 48840 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Ingham County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. P.O. Box 562	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other
		other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Deb	Debtor 1 Margery Lee Wakefield Case number (if known)							
Par	t 2: Tell the Court About	our Bank	ruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	☐ Chapt	er 7					
☐ Chapter 11								
		☐ Chapt	er 12					
		■ Chapt	er 13					
8.	How you will pay the fee	abo	will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more bout how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or der. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or che pre-printed address.					, cashier's check, or money
				the fee in installments. If		e this option, sign	and attach the Applica	ntion for Individuals to Pay
			•	e in Installments (Official Fo t my fee be waived (You m	,	t this antion only it	f you are filing for Chan	ter 7. By law, a judge may
		but app	is not requ lies to you		may do se able to pa	o only if your inco y the fee in install	me is less than 150% o ments). If you choose t	of the official poverty line that his option, you must fill out
9.	Have you filed for	□ No.						
bankruptcy within the last 8 years? Yes.								
	,		District	Colorado - Denver	When	4/25/11	Case number	11-19373
			District	20101440	When	.,20,	Case number	11.10010
			District	-	When	-	Case number	
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor				Relationship to y	
			District		When			
			Debtor				Relationship to y	
			District		When		Case number, if I	known
11.	Do you rent your	□ No.	Go to li	ine 12.				
	residence?	Yes.	Has yo	ur landlord obtained an evic	tion judgm	ent against you a	nd do you want to stay	in your residence?
				No. Go to line 12.				
				Yes. Fill out <i>Initial Statemen</i> bankruptcy petition.	nt About a	n Eviction Judgme	ent Against You (Form ^a	101A) and file it with this

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A sole busine an ind separa as a c partner If you sole p separa	rou a sole proprietor y full- or part-time ness? e proprietorship is a ess you operate as dividual, and is not a rate legal entity such corporation, ership, or LLC. I have more than one proprietorship, use a rate sheet and attach his petition.	■ No. □ Yes.	Go to Pa	art 4. Ind location of bus business, if any Street, City, State	iness e & ZIP Code
A sole busine an ind separa as a c partner If you sole p separa	rou a sole proprietor y full- or part-time ness? e proprietorship is a ess you operate as dividual, and is not a rate legal entity such corporation, ership, or LLC. I have more than one proprietorship, use a rate sheet and attach	■ No.	Go to Pa	art 4. Ind location of bus business, if any Street, City, State	iness e & ZIP Code
A sole busine an ind separa as a c partne If you sole p separa	e proprietorship is a less you operate as dividual, and is not a rate legal entity such corporation, ership, or LLC. I have more than one proprietorship, use a rate sheet and attach	_	Name of Number, Check th	business, if any Street, City, State	e & ZIP Code
busine an ind separa as a c partne If you sole p separa	ess you operate as dividual, and is not a rate legal entity such corporation, ership, or LLC. I have more than one proprietorship, use a rate sheet and attach	☐ Yes.	Name of Number,	business, if any Street, City, State	e & ZIP Code
busine an ind separa as a c partne If you sole p separa	ess you operate as dividual, and is not a rate legal entity such corporation, ership, or LLC. I have more than one proprietorship, use a rate sheet and attach		Number, Check th	Street, City, Stat	
busine an ind separa as a c partne If you sole p separa	ess you operate as dividual, and is not a rate legal entity such corporation, ership, or LLC. I have more than one proprietorship, use a rate sheet and attach		Number, Check th	Street, City, Stat	
sole p separa	oroprietorship, use a rate sheet and attach		Check th		
			□ +	ne appropriate bo	
					x to describe your business:
				lealth Care Busir	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))
			□ N	None of the above	
Chapt Bankr	rou filing under oter 11 of the cruptcy Code and are a small business or?	deadlines operation in 11 U.S.	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure		
For a	definition of small	No.	i am not	filing under Chap	iter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filin	g under Chapter	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filin	g under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Part 4:	Report if You Own or	Have Any	Hazardous	Property or An	y Property That Needs Immediate Attention
	ou own or have any	■ No.	- Ideal dodd	Troporty of 7m.	, i i sporty mai neede illimitediate / itemiteli
	erty that poses or is ed to pose a threat	☐ Yes.			
of imr	minent and ifiable hazard to	□ res.	What is the	hazard?	
Or do prope	public health or safety? Or do you own any property that needs immediate attention?			e attention is ny is it needed?	
perish livesto or a b	xample, do you own hable goods, or ock that must be fed, building that needs tt repairs?		Where is th	ne property?	
5. g 3111					Number, Street, City, State & Zip Code

Debtor 1 Margery Lee Wakefield

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Margery Lee Wakefield		Case number (if known)						
Part	t 6: Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you	owe that are not consumer debts or bu	usiness debts			
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapte	er 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	☐ Yes.		. Do you estimate that after any exemp available to distribute to unsecured cred	t property is excluded and administrative expenses ditors?			
	administrative expenses		□ No					
	are paid that funds will be available for		□Yes					
	distribution to unsecured creditors?							
18.	How many Creditors do	■ 1-49		□ 1,000-5,000	☐ 25,001-50,000			
	you estimate that you owe?	■ 1-49 □ 50-99)	☐ 5001-10,000	☐ 50,001-100,000			
	owe?	☐ 100-1		1 0,001-25,000	☐ More than100,000			
		□ 200-9	199					
19.	How much do you	\$ 0 - \$	\$50,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		001 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion			
			,001 - \$500,000 ,001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 millio				
		L \$500,	001 - \$1 million	= \$100,000,001 \$000 mile				
20.	How much do you	\$0 - \$	550,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion			
			,001 - \$500,000 ,001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 millio				
		— фооо,			·			
Part	Sign Below							
For	you	I have ex	camined this petition, and I do	eclare under penalty of perjury that the	information provided is true and correct.			
				igible, under Chapter 7, 11,12, or 13 of title 11, and I choose to proceed under Chapter 7.				
				d not pay or agree to pay someone who the notice required by 11 U.S.C. § 342(o is not an attorney to help me fill out this (b).			
		I request	relief in accordance with the	e chapter of title 11, United States Code	e, specified in this petition.			
		bankrupt and 357	tcy case can result in fines up 1.		oney or property by fraud in connection with a o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
			gery Lee Wakefield y Lee Wakefield	Signature of I	Debtor 2			
			e of Debtor 1	-				
		Executed	d on _ January 2, 2017	Executed on				
			MM / DD / YYYY		MM / DD / YYYY			

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Debtor 1 Margery Lee Wakefield Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Scott Marshall Neuman Signature of Attorney for Debtor	Date	January 2, 2017 MM / DD / YYYY	
Scott Marshall Neuman Printed name			
Scott Marshall Neuman, P.C.			
2196 Commons Parkway Okemos, MI 48864			
Number, Street, City, State & ZIP Code			
Contact phone 517-349-2700	Email address	xneumanx@aol.com	
P-47863			
Bar number & State			

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United States Bankruptcy Court Western District of Michigan

In re	Margery Lee Wakefield		Case No.	
•		Debtor(s)	Chapter	13

VERIFICATION OF CREDITOR MATRIX

The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date: January 2, 2017	/s/ Margery Lee Wakefield	
	Margery Lee Wakefield	
	Signature of Debtor	
Date: January 2, 2017	/s/ Scott Marshall Neuman	
	Signature of Attorney	
	Scott Marshall Neuman P-47863	
	Scott Marshall Neuman, P.C.	
	2196 Commons Parkway	
	Okemos, MI 48864	
	517-349-2700 Fax: 517-349-2716	

55TH DISTRICT COURT 700 BUHL AVE. MASON MI 48854

ARS NATIONAL SERVICES INC. P.O. BOX 469046 ESCONDIDO CA 92046

BANK OF THE WEST C/O THE BEST SERVICE CO. 6700 S. CENTINELA AVE. CULVER CITY CA 90230

CAPITAL 1/BEST BUY 50 NORTHWEST POINT RD. ELK GROVE VILLAGE IL 60007

CAPITAL GROUP, LLC 455 CENTER RD. WEST SENECA NY 14224

CAPITAL ONE BANK USA 15000 CAPITAL ONE DR. RICHMOND VA 23238

CAROL WRIGHT GIFTS SHOP NOW PAY PLAN P.O. BOX 2852 MONROE WI 53566

CBCS P.O. BOX 2334 COLUMBUS OH 43216

CBCS P.O. BOX 2334 COLUMBUS OH 43216

CENTURA-PORTER C/O BC SERVICES INC. 550 DISC DR. LONGMONT CO 80503 CHASE AUTO P.O. BOX 24696 COLUMBUS OH 43224

COMENITY BANK/MEIJER P.O. BOX 182789 COLUMBUS OH 43218

CREDIT ONE BANK NA P.O. BOX 98875 LAS VEGAS NV 89193

CROWN ASSET MANAGEMENT, LLC 3100 BRECKENRIDGE BLVD DULUTH GA 30096

EDWARD W. SPARROW HOSPITAL ASS 7364 SOLUTIONS CENTER CHICAGO IL 60677

FIRST PREMIER BANK 3820 N. LOUISE AVE. SIOUX FALLS SD 57107

INTERNAL REVENUE SERVICE P.O. BOX 21126 PHILADELPHIA PA 19114

LANSING AUTOMAKERS FEDERAL CU P.O. BOX 26188 LANSING MI 48909

LVNV FUNDING LLC P.O. BOX 10497 GREENVILLE SC 29603

MICHIGAN DEPT. OF TREASURY COLLECTION DIVISION/BANKRUPTCY P.O. BOX 30168 LANSING MI 48909

MID-MICHIGAN COLLECTION BUREAU P.O. BOX 130 ST. JOHNS MI 48879

MRS ASSOCIATES, INC. OF NJ 1930 OLNEY AVE. CHERRY HILL NJ 08003

PROFESSIONAL RECOVERY 2700 MERIDIAN PKWY SUITE 200 DURHAM NC 27713

REGIONAL EMS
C/O AMERICOLLECT
P.O. BOX 1566
MANITOWOC WI 54221

SECOND ROUND, LP P.O. BOX 41955 AUSTIN TX 78704

SMITH & JOHNSON, ATTORNEYS SIX HUNDRED THREE BAY ST. P.O. BOX 705 TRAVERSE CITY MI 49685

SPARROW 7364 SOLUTION CENTER CHICAGO IL 60677

SPARROW HEALTH SYSTEM 8000 RELIABLE PARKWAY CHICAGO IL 60686

SYNCB/CARE CREDIT P.O. BOX 965036 ORLANDO FL 32896

SYNCB/DISCOUNT TIRE P.O. BOX 965036 ORLANDO FL 32896

SYNCB/WALMART P.O. BOX 965024 ORLANDO FL 32896 THE BEST SERVICE COMP. P.O. BOX 45405
LOS ANGELES CA 90045

THE SWISS COLONY P.O. BOX 2814 MONROE WI 53566

WISCONSIN CHEESEMAN 1112 7TH AVE. MONROE WI 53566 Case:17-00003-swd Doc #:1 Filed: 01/02/17 Page 13 of 49

	Case.17-00003-5Wd Doc #.1 Tiled. 01/02/17 Fag	ge 13 01 49
Fill in this infor	mation to identify your case and this filing:	
Debtor 1	Margery Lee Wakefield	
Debtor 2	First Name Middle Name Last Name	
(Spouse, if filing)	First Name Middle Name Last Name	_
United States Ba	ankruptcy Court for the: WESTERN DISTRICT OF MICHIGAN	_
Case number _		☐ Check if this is an amended filing
Official Fo	orm 106A/B	
Schedul	le A/B: Property	12/15
In each category, s think it fits best. E	separately list and describe items. List an asset only once. If an asset fits in more than one cate se as complete and accurate as possible. If two married people are filing together, both are equal re space is needed, attach a separate sheet to this form. On the top of any additional pages, write	lly responsible for supplying correct
Part 1: Describe	Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In	
1. Do you own or	have any legal or equitable interest in any residence, building, land, or similar property?	
■ No. Go to Pa	rt 2.	
☐ Yes. Where	is the property?	
Part 2: Describe	Your Vehicles	
	ise, or have legal or equitable interest in any vehicles, whether they are registered or ives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpire	
3. Cars, vans, tr	rucks, tractors, sport utility vehicles, motorcycles	
■ No		
☐ Yes		
	ircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessors, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessor	
■ No		
☐ Yes		
	ar value of the portion you own for all of your entries from Part 2, including any entricave attached for Part 2. Write that number here	
Part 3: Describe	Your Personal and Household Items	
Do you own or	have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
Examples: Ma	oods and furnishings ajor appliances, furniture, linens, china, kitchenware	·
■ Yes. Desc	cribe	
	bookcases (2)	\$20.00
	desk	\$10.00

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Debtor 1	Margery Lee	Wakefield	Case num	nber (if known)	
		table and chairs			\$25.00
		table			\$5.00
		microwave			\$15.00
		small appliances			\$20.00
		dishes and flatware			\$10.00
		dresser			\$20.00
		bed			\$75.00
		recliner			\$50.00
□No		nd radios; audio, video, stereo, and digita phones, cameras, media players, games		nners; music collections; e	lectronic devices
		computer (not working)			\$10.00
Example No □ Yes. Pequipm Example No	other collection Describe ent for sports ar	graphic, exercise, and other hobby equip			
■ No		, shotguns, ammunition, and related equ	ipment		
11. Clothe <i>Exam</i> ☐ No	s oles: Everyday clo	othes, furs, leather coats, designer wear,	shoes, accessories		
■ Yes.	Describe	clothes			\$100.00

Schedule A/B: Property

Official Form 106A/B

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Debtor 1	Margery Lee Wakef	ield		Case number (if known)	
☐ No	<i>mples:</i> Everyday jewelry, co	ostume jewelry, engag	ement rings, wedding rings, heirld	oom jewelry, watches, gems, go	ld, silver
		orted jewelry			\$10.00
	a333C	nted jeweny			
Exai ■ No	farm animals mples: Dogs, cats, birds, ho s. Describe	rses			
14. Any €		hold items you did n	not already list, including any h	ealth aids you did not list	
☐ Ye	s. Give specific information	l			
		•	art 3, including any entries for p	-	\$420.00
Part 4:	Describe Your Financial Asse	ts			
Do you	own or have any legal or e	equitable interest in a	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	mples: Money you have in y		me, in a safe deposit box, and on	hand when you file your petition Cash	10.00
<i>Exai</i> □ No	institutions. If you ha		unts; certificates of deposit; share with the same institution, list each		ouses, and other similar
_ 10.	J				
	17.1.	checking	PNC		\$20.00
	17.2.	checking and savings	Huntington Bank		\$250.00
	•		kerage firms, money market acco	punts	
	S	Institution or issuer n	name:		
joint	venture	interests in incorpo	rated and unincorporated busi	nesses, including an interest	in an LLC, partnership, and
■ No	s. Give specific information	about them			
— 16		me of entity:	••••	% of ownership:	
Neg	otiable instruments include -negotiable instruments are	personal checks, cash those you cannot trar	tiable and non-negotiable instruiters' checks, promissory notes, ansfer to someone by signing or de	and money orders.	

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De	ebtor 1	Margery Lee Wakefield		Case numb	er (if known)	
		Issuer name:				
21.	Examp	, , , , ,	401(k), 403(b)	, thrift savings accounts, or other pension or pr	rofit-sharing plar	as
	Yes.	List each account separately. Type of account:		Institution name:		
		403B		TIAFF Cref		\$430.00
22.	Your s			you may continue service or use from a compa utilities (electric, gas, water), telecommunicat		or others
				Institution name or individual:		
		security depos	sit for rent	security deposit for apartment		\$300.00
23.	■ No			ou, either for life or for a number of years)		
	☐ Yes	Issuer name and desc	ription.			
24.		ts in an education IRA, in an accou C. §§ 530(b)(1), 529A(b), and 529(b)		ed ABLE program, or under a qualified state	e tuition progra	m.
	☐ Yes	Institution name and d	escription. Sep	parately file the records of any interests.11 U.S	.C. § 521(c):	
	■ No	equitable or future interests in pro-		han anything listed in line 1), and rights or	powers exercis	sable for your benefit
		s, copyrights, trademarks, trade se		or intellectual property		
20.				m royalties and licensing agreements		
	☐ Yes.	Give specific information about them	1			
27.		es, franchises, and other general in bles: Building permits, exclusive licens		re association holdings, liquor licenses, profes	sional licenses	
		Give specific information about them	1			
M	oney or	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you				
	■ No □ Yes.	Give specific information about them	, including whe	ther you already filed the returns and the tax y	ears	
29.	Examp	support bles: Past due or lump sum alimony, s	spousal suppor	t, child support, maintenance, divorce settleme	ent, property set	tlement
	■ No □ Yes.	Give specific information				
30.		amounts someone owes you oles: Unpaid wages, disability insuran benefits; unpaid loans you made		disability benefits, sick pay, vacation pay, worlese	kers' compensat	ion, Social Security
		Give specific information				

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De	ebtor 1	Margery Lee Wakefield	Case number (if known)	
31.		ts in insurance policies bles: Health, disability, or life insurance; health savings account (HSA	A); credit, homeowner's, or renter's insural	nce
		Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
32.	If you a someo	erest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurane has died. Give specific information	ance policy, or are currently entitled to rec	eive property because
33.	Examp ■ No	against third parties, whether or not you have filed a lawsuit or oles: Accidents, employment disputes, insurance claims, or rights to subscribe each claim		
34.	■ No	contingent and unliquidated claims of every nature, including continuous cont	ounterclaims of the debtor and rights to	set off claims
35.	■ No	ancial assets you did not already list Give specific information		
36		he dollar value of all of your entries from Part 4, including any eart 4. Write that number here	. • .	\$1,010.00
Pa	rt 5: Des	scribe Any Business-Related Property You Own or Have an Interest In. L	ist any real estate in Part 1.	
	No. Go	own or have any legal or equitable interest in any business-related proper to Part 6. So to line 38.	erty?	
Pa		scribe Any Farm- and Commercial Fishing-Related Property You Own or ou own or have an interest in farmland, list it in Part 1.	Have an Interest In.	
46.	■ No.	own or have any legal or equitable interest in any farm- or com Go to Part 7. . Go to line 47.	nmercial fishing-related property?	
Pa	rt 7:	Describe All Property You Own or Have an Interest in That You Did No	t List Above	
53.	Examp ■ No	have other property of any kind you did not already list? oles: Season tickets, country club membership Give specific information		
54	. Add t	he dollar value of all of your entries from Part 7. Write that numl	ber here	\$0.00

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Debt	or 1 Margery Lee Wakefield		Case number (if known)	
Part 8	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$0.00		
57.	Part 3: Total personal and household items, line 15	\$420.00		
58.	Part 4: Total financial assets, line 36	\$1,010.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$1,430.00	Copy personal property total	\$1,430.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$1,430.00

	017	00000	- 11-4 - File de 04 100 14.7	Danie 10 of 10	
	Case:17-	00003-SWa Doo	c #:1 Filed: 01/02/17	Page 19 of 49	
Fill in this info	rmation to identify your	case:			
Debtor 1	Margery Lee Wak				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	WESTERN DISTRICT	OF MICHIGAN		
Case number					
(if known)				_	neck if this is an nended filing
Official Ea	orm 106C				
	orm 106C		N-! -		
Scheau	ie C: The Pro	operty You (Claim as Exemp	τ	4/16
the property you	listed on Schedule A/B: Find attach to this page as	Property (Official Form 106	filing together, both are equally re 6A/B) as your source, list the prop dditional Page as necessary. On the	erty that you claim as exemp	t. If more space is
specific dollar a any applicable s funds—may be exemption to a	amount as exempt. Alter statutory limit. Some ex- unlimited in dollar amou	natively, you may claim emptions—such as thos unt. However, if you clai	ify the amount of the exemption the full fair market value of the se for health aids, rights to rece m an exemption of 100% of fair operty is determined to exceed	property being exempted uive certain benefits, and tax market value under a law t	up to the amount of x-exempt retirement hat limits the
Part 1: Ident	tify the Property You Cla	aim as Exempt			
1. Which set of	of exemptions are you c	laiming? Check one only	r, even if your spouse is filing with	you.	
☐ You are o	claiming state and federal	nonbankruptcy exemption	ns. 11 U.S.C. § 522(b)(3)		
You are	claiming federal exemption	ns. 11 U.S.C. § 522(b)(2)		

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	· · · · · · · · · · · · · · · · · · ·		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
bookcases (2) Line from Schedule A/B: 6.1	\$20.00		\$20.00	11 U.S.C. § 522(d)(3)
			100% of fair market value, up to any applicable statutory limit	
desk Line from Schedule A/B: 6.2	\$10.00		\$10.00	11 U.S.C. § 522(d)(3)
Ellie Holli Geriedale AVD. G.E			100% of fair market value, up to any applicable statutory limit	
table and chairs Line from Schedule A/B: 6.3	\$25.00		\$25.00	11 U.S.C. § 522(d)(3)
Line non schedule A/D. 4.4			100% of fair market value, up to any applicable statutory limit	
table Line from Schedule A/B: 6.4	\$5.00		\$5.00	11 U.S.C. § 522(d)(3)
Ellie Holli ochodale Arb. 4.4			100% of fair market value, up to any applicable statutory limit	
microwave Line from Schedule A/B: 6.5	\$15.00		\$15.00	11 U.S.C. § 522(d)(3)
LINE HOLL SCHEUUR AVD. U.J			100% of fair market value, up to any applicable statutory limit	

Brief description of the property and line on	Current value of the	Amo	ount of the exemption you claim	Specific laws that allow exemption
Schedule A/B that lists this property	portion you own Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
small appliances Line from Schedule A/B: 6.6	\$20.00	•	\$20.00	11 U.S.C. § 522(d)(3)
Line from Scriedule AVB. 0.0			100% of fair market value, up to any applicable statutory limit	
dishes and flatware Line from Schedule A/B: 6.7	\$10.00		\$10.00	11 U.S.C. § 522(d)(3)
zino nom osnodalo / v z. em			100% of fair market value, up to any applicable statutory limit	
dresser Line from Schedule A/B: 6.8	\$20.00		\$20.00	11 U.S.C. § 522(d)(3)
Line nom <i>Schedule AVB</i> . 0.0			100% of fair market value, up to any applicable statutory limit	
bed Line from Schedule A/B: 6.9	\$75.00		\$75.00	11 U.S.C. § 522(d)(3)
Ellie Holli osiloddio 702. Glo			100% of fair market value, up to any applicable statutory limit	
recliner Line from Schedule A/B: 6.10	\$50.00		\$50.00	11 U.S.C. § 522(d)(3)
Line nom <i>Schedule AVD</i> . 0.10			100% of fair market value, up to any applicable statutory limit	
TV Line from <i>Schedule A/B</i> : 7.1	\$50.00		\$50.00	11 U.S.C. § 522(d)(3)
Ellie Holli osilodale 702.			100% of fair market value, up to any applicable statutory limit	
computer (not working) Line from Schedule A/B: 7.2	\$10.00		\$10.00	11 U.S.C. § 522(d)(3)
Ellie Holli osiloddio 702. 112			100% of fair market value, up to any applicable statutory limit	
clothes Line from Schedule A/B: 11.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(3)
			100% of fair market value, up to any applicable statutory limit	
asssorted jewelry Line from Schedule A/B: 12.1	\$10.00		\$10.00	11 U.S.C. § 522(d)(4)
Line nom <i>Schedule AVD</i> . 12.1			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$10.00		\$10.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
checking: PNC Line from Schedule A/B: 17.1	\$20.00		\$20.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
checking and savings: Huntington Bank	\$250.00		\$250.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.2	_		100% of fair market value, up to any applicable statutory limit	

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Brief description of the property and line on Schedule A/B that lists this property Current value of the property and line on Schedule A/B that lists this property Copy the value from Schedule A/B							
403B: TIAFF Cref Line from Schedule A/B: 21.1 \$430.00 \$430.00 100% of fair market value, up to any applicable statutory limit security deposit for rent: security deposit for apartment Line from Schedule A/B: 22.1 \$300.00 100% of fair market value, up to any applicable statutory limit 11 U.S.C. § 522(d)(12) \$300.00 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?			Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
Line from Schedule A/B: 21.1 Security deposit for rent: security deposit for apartment \$300.00 \$300				Che	ck only one box for each exemption.		
security deposit for rent: security deposit for apartment Line from Schedule A/B: 22.1 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No			\$430.00		\$430.00	11 U.S.C. § 522(d)(12)	
deposit for apartment Line from Schedule A/B: 22.1 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No		Line Irom Scriedule Arb. 21.1					
Line from Schedule A/B: 22.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No			\$300.00		\$300.00	11 U.S.C. § 522(d)(5)	
(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) ■ No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ■ No		•					
□ No	3.	(Subject to adjustment on 4/01/19 and every			led on or after the date of adjustme	nt.)	
		☐ Yes. Did you acquire the property cover	red by the exemption wi	thin 1	.215 davs before you filed this case	?	
□ Yes		=			, , ,	•	
		_ , , , , , ,	, , , , , , , , , , , , , , , , , , , ,		, ,		

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Fill in this infor				
Debtor 1				
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (OF MICHIGAN	
Case number _				 Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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		Case.17-00	003-3Wu D	OC#.1 THEU	1. 01/02/	11 Fage 2	0 01 49	
Fill	in this inform	ation to identify your cas	e:					
De	btor 1	Margery Lee Wakefie	eld					
		First Name	Middle Name	Last Nam	ne	_		
	btor 2 buse if, filing)	First Name	Middle Name	Last Nam	20			
(Spi	ouse II, IIIIIg)				ie			
Un	ited States Ban	kruptcy Court for the: W	ESTERN DISTRIC	T OF MICHIGAN				
Ca	se number							
(if kı	nown)						_	if this is an
							amend	ed filing
∩f	ficial Form	106F/F						
		F: Creditors Who	Have Unse	cured Claim				12/15
		accurate as possible. Use Pa				r creditors with NON	PRIORITY claims I i	
eft. nam	Attach the Contine and case num	,	you have no informa					
		of Your PRIORITY Unsec						
1.		s have priority unsecured cl	aims against you?					
	□ No. Go to Pa	ırt 2.						
_	Yes.							
2.	identify what type possible, list the	priority unsecured claims. If e of claim it is. If a claim has be claims in alphabetical order ac nan one creditor holds a particu	oth priority and nonprice cording to the creditor	rity amounts, list that 's name. If you have r	claim here ar	nd show both priority a	nd nonpriority amount	s. As much as
	(For an explanat	tion of each type of claim, see t	he instructions for this	form in the instruction	n booklet.)			
						Total claim	Priority amount	Nonpriority amount
2.1	Internal	Revenue Service	Last 4 digit	s of account number		Unknown	Unknown	Unknown
	,	ditor's Name						-
	P.O. Box	(21126 phia, PA 19114	When was t	he debt incurred?	2014/20	15		
		eet City State Zlp Code	As of the da	te you file, the claim	is: Check a	ll that apply		
	Who incurred	the debt? Check one.	☐ Continge	nt				
	Debtor 1 on	nly	☐ Unliquida	ated				
	Debtor 2 on	nly	☐ Disputed					
	Debtor 1 an	nd Debtor 2 only	Type of PR	ORITY unsecured cl	aim:			
	☐ At least one	e of the debtors and another	☐ Domestic	support obligations				
	☐ Check if th	is claim is for a community	debt Taxes ar	nd certain other debts	you owe the	government		
		ubject to offset?	_	or death or personal in	•	•		
	■ No		Other. S	pecify				
	☐ Yes			Income Ta	ax			

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Debte	Margery Lee Wakefield					
2.2	Michigan Dept. of Treasury	Last 4 digits of account number		Unknown	\$0.00	\$0.00
	Priority Creditor's Name Collection Division/Bankruptcy P.O. Box 30168 Lansing, MI 48909	When was the debt incurred?	2015			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Chec	k all that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
	☐ At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	Taxes and certain other debts	ou owe t	he government		
	s the claim subject to offset?	Claims for death or personal in	ury while	you were intoxicated		
	No	Other. Specify				
	☐ Yes	Income Ta	X			
u th	ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each can one creditor holds a particular claim, list the other art 2.	laim. For each claim listed, identify w	nat type o	of claim it is. Do not list claims alrea	dy included in Pa	rt 1. If more on Page of
4.1	Bank of the West	Last 4 digits of account numb	er <u>93</u>	62		\$286.00
	Nonpriority Creditor's Name c/o The Best Service Co. 6700 S. Centinela Ave. Culver City, CA 90230	When was the debt incurred?	<u>O</u>	pened 03/16		
	Number Street City State Zlp Code	As of the date you file, the cla	im is: Ch	neck all that apply		
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsec ☐ Student loans	ured clai	m:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?		eparation	n agreement or divorce that you did	not	
	■ No	☐ Debts to pension or profit-sh	aring pla	ns, and other similar debts		
	☐ Yes	Other, Specify Overdra	ft			

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Debto	r 1 Margery Lee Wakefield	Case number (if know)				
4.2	Capital 1/Best Buy	Last 4 digits of account number	1905	\$701.00		
	Nonpriority Creditor's Name 50 Northwest Point Rd. Elk Grove Village, IL 60007	When was the debt incurred?	Opened 03/13 Last Active 5/18/16			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	Contingent				
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed				
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	d claim: ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit card	purchases			
4.3	Capital One Bank USA Nonpriority Creditor's Name	Last 4 digits of account number	0347	\$1,082.00		
	15000 Capital One Dr. Richmond, VA 23238	When was the debt incurred?	Opened 05/15 Last Active 5/23/16			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	Contingent				
	Debtor 2 only	Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed	I alatan			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	☐ Check if this claim is for a community debt Is the claim subject to offset?					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit card	purchases			
4.4	Carol Wright Gifts Nonpriority Creditor's Name	Last 4 digits of account number	68A4	\$103.00		
	Shop Now Pay Plan P.O. Box 2852 Monroe, WI 53566	When was the debt incurred?	2015			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar dabte			
	■ No		y pians, and other similar debts			
	☐ Yes	Other Specify General				

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Debtor	1 Margery Lee Wakefield	Case number (if know)					
4.5	Centura-Porter	Last 4 digits of account number	1581	\$50.00			
	Nonpriority Creditor's Name c/o BC Services Inc. 550 Disc Dr.	When was the debt incurred?	Opened 06/15				
	Longmont, CO 80503 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify General					
4.6	Chase Auto	Last 4 digits of account number	6185	\$2,109.00			
	Nonpriority Creditor's Name		Opened 12/13 Last Active				
-	P.O. Box 24696 Columbus, OH 43224	When was the debt incurred?					
	Number Street City State ZIp Code	As of the date you file, the claim					
	Who incurred the debt? Check one.	_					
	Debtor 1 only Contingent						
	Debtor 2 only	Unliquidated					
	Debtor 1 and Debtor 2 only	Disputed					
	At least one of the debtors and another						
	☐ Check if this claim is for a community debt						
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Repossess	ion on a car				
4.7	Comenity Bank/Meijer	Last 4 digits of account number	9940	\$465.00			
	Nonpriority Creditor's Name P.O. Box 182789 Columbus Old 42249	When was the debt incurred?	Opened 07/15 Last Active 10/03/16				
	Columbus, OH 43218 Number Street City State Zlp Code	As of the date you file, the claim i	is: Chock all that apply				
	Who incurred the debt? Check one.	As of the date you me, the dam's	S. Olleck all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt	Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	No	☐ Debts to pension or profit-sharin					
	Yes	■ Other. Specify Credit card	purchases				

Debtor	1 Margery Lee Wakefield	Case number (if know)					
4.8	Credit One Bank NA Nonpriority Creditor's Name	Last 4 digits of account number	4485	\$355.00			
	P.O. Box 98875 Las Vegas, NV 89193	When was the debt incurred?	Opened 02/12 Last Active 5/18/16				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated					
	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No □ Yes	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	aration agreement or divorce that you did not g plans, and other similar debts				
4.9	Edward W. Sparrow Hospital Ass	Last 4 digits of account number	6802	\$35.00			
	Nonpriority Creditor's Name 7364 Solutions Center	When was the debt incurred?	2016	<u> </u>			
	Chicago, IL 60677 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim					
	■ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated						
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Type of NONPRIORITY unsecured claim: ☐ Student loans					
	debt Is the claim subject to offset?	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Medical					
4.1	First Premier Bank	Last 4 digits of account number	2479	\$367.00			
	Nonpriority Creditor's Name 3820 N. Louise Ave. Sioux Falls, SD 57107	When was the debt incurred?	Opened 10/15 Last Active 5/23/16				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	d claim:					
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	■ Other. Specify Credit card	purchases				

Debtor	1 Margery Lee Wakefield	ry Lee Wakefield Case number (if know)				
4.1 1	Lansing Automakers Federal CU	Last 4 digits of account number	0001		\$11,008.00	
	Nonpriority Creditor's Name P.O. Box 26188 Lansing, MI 48909	When was the debt incurred?	Opened 08/14 11/04/14	Last Active		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that appl	ly		
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or o	divorce that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other sin	nilar debts		
	Yes	Other. Specify Repossess	ion on a car			
4.1	Regional EMS	Last 4 digits of account number	7029		\$100.00	
	Nonpriority Creditor's Name c/o Americollect P.O. Box 1566	When was the debt incurred?	2014/2016			
	Manitowoc, WI 54221 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that appl	ly		
	Who incurred the debt? Check one.					
	■ Debtor 1 only □ Contingent					
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or o	divorce that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other sin	nilar debts		
	Yes	Other. Specify Medical				
4.1	Sparrow	Last 4 digits of account number	5640	_	\$865.00	
	Nonpriority Creditor's Name 7364 Solution Center Chicago, IL 60677	When was the debt incurred?	2014/2015			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that appl	y		
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only					
	☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	divorce that you did not			
	Is the claim subject to offset?	report as priority claims		, . . . 		
	■ No	Debts to pension or profit-sharing	g plans, and other sin	nilar debts		
	Yes	Other. Specify Medical				

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ebto	Margery Lee Wakefield	Case number (if know)				
1	Sparrow Health System	Last 4 digits of account number	8508	\$56.00		
	Nonpriority Creditor's Name 8000 Reliable Parkway Chicago, IL 60686	When was the debt incurred?	2016			
	Number Street City State Zlp Code	As of the date you file, the claim i				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt		aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Medical				
1	SYNCB/Care Credit	Last 4 digits of account number	6210	\$639.0		
	Nonpriority Creditor's Name		Opened 04/44 Leet Active			
	P.O. Box 965036 Orlando, FL 32896	When was the debt incurred?	Opened 01/14 Last Active 5/18/16			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt		aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No No	Debts to pension or profit-sharing	•			
	Yes	Other. Specify Credit card	purchases			
	SYNCB/Discount Tire	Last 4 digits of account number	7983	\$386.0		
_	Nonpriority Creditor's Name	_	0			
	P.O. Box 965036 Orlando, FL 32896	When was the debt incurred?	Opened 10/14 Last Active 5/24/16			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community					
	debt	<u> </u>				
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	□Yes	Other Specify Credit card	purchases			

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Debtor	1 Margery Lee Wakefield	Case number (if know)				
4.1 7	SYNCB/Walmart	Last 4 digits of account number	0509	\$345.00		
	P.O. Box 965024 Orlando, FL 32896	When was the debt incurred?	Opened 08/15 Last Active 5/24/16			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	No	g plans, and other similar debts				
	☐ Yes	Other. Specify Credit card	purchases			
4.1	The Swiss Colony Nonpriority Creditor's Name	Last 4 digits of account number	584A	\$294.00		
	P.O. Box 2814 Monroe, WI 53566	When was the debt incurred?				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i				
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only					
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Credit card	purchases			
4.1	Wisconsin Cheeseman	Last 4 digits of account number	539A	\$551.00		
	Nonpriority Creditor's Name 1112 7th Ave. Monroe, WI 53566	When was the debt incurred?	Opened 12/14 Last Active 4/26/16			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent ☐ Unliquidated ☐ Disputed				
	Debtor 2 only					
	☐ Debtor 1 and Debtor 2 only					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	unity				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Credit card				

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Margery Lee Wakefield	Case number (if know)				
Name and Address 55th District Court 700 Buhl Ave. Mason, MI 48854		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number	_ast 4 digits of account number			
Name and Address ARS National Services Inc. P.O. Box 469046 Escondido, CA 92046		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number				
Name and Address Capital Group, LLC 455 Center Rd. West Seneca, NY 14224		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number				
Name and Address CBCS P.O. Box 2334 Columbus, OH 43216		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Name and Address CBCS P.O. Box 2334 Columbus, OH 43216		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number				
Name and Address Crown Asset Management, LLC 3100 Breckenridge Blvd Duluth, GA 30096		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number				
Name and Address LVNV Funding LLC P.O. Box 10497 Greenville, SC 29603		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Name and Address Mid-Michigan Collection Bureau P.O. Box 130 St. Johns, MI 48879		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Name and Address MRS Associates, Inc. of NJ 1930 Olney Ave. Cherry Hill, NJ 08003		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Name and Address Professional Recovery 2700 Meridian Pkwy Suite 200 Durham, NC 27713		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Name and Address Second Round, LP P.O. Box 41955 Austin, TX 78704	On which entry in Part 1 or Part 2 did you Line 4.15 of (Check one):	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Name and Address Smith & Johnson, Attorneys Six Hundred Three Bay St.	On which entry in Part 1 or Part 2 did yo	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			

Official Form 106 E/F

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Debtor 1 Margery Lee Wakefield		Case number (if know)		
P.O. Box 705 Traverse City, MI 49685				
• .	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?		
The Best Service Comp.	Line 4.1 of (Check one):	Part 1: Creditors with Priority Unsecured Claims		
P.O. Box 45405 Los Angeles, CA 90045	•	Part 2: Creditors with Nonpriority Unsecured Claims		
•	Last 4 digits of account number			

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Т	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Т	otal Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	19,797.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	19,797.00

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Fill in this infor	mation to identify your	case:		
Debtor 1	Margery Lee Wak	refield		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		WESTERN DISTRICT (OF MICHIGAN	
Case number				
(if known)				☐ Che
				ame

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have th r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4	,				
	Name				<u> </u>
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.5	2.1.)		5 10.10		
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	_

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	Ousc.11	00000 3Wa Doo	Thea. Oir	72/11 1 age 04 01 40	
Fill in this	information to identify you	r case:			
Debtor 1	Margery Lee Wa	kefield			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	WESTERN DISTRICT (OF MICHIGAN		
Case num (if known)	ber				Check if this is an amended filing
	l Form 106H Jule H: Your Cod	debtors			12/15
people are ill it out, a our name	filing together, both are eq	ually responsible for supper e boxes on the left. Attach n). Answer every question	olying correct informat n the Additional Page t	s complete and accurate as po ion. If more space is needed, c o this page. On the top of any A	opy the Additional Page,
1. 50	you have any codebiors: (i you are illing a joint case,	do not list citrici spouse	as a codebior.	
■ No □ Yes					
2 Wit	hin the last 8 years have ye	ou lived in a community pr	operty state or territor	y? (Community property states a	nd tarritarias includa
	na, California, Idaho, Louisian				na territories include
■ No	. Go to line 3.				
	s. Did your spouse, former spo	ouse, or legal equivalent live	e with you at the time?		
		, g -	, ,		
in line Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	if your spouse is filing with yo sure you have listed the credite 6G). Use Schedule D, Schedule	or on Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and	ZIP Code		Column 2: The creditor to N Check all schedules that ap	
	, , , ,			_	۲۰٫۰
3.1	Name			Schedule D, line	
	Traine			☐ Schedule E/F, line ☐ Schedule G, line	
_				Schedule G, line	
	Number Street City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			Schedule D, line	
				☐ Schedule G, line	
-	Number Street			_	_
	City	State	ZIP Code		

Fill	in this information to identify your ca	ase:									
De	btor 1 Margery Lee	Wakefield									
	btor 2 buse, if filing)										
Un	ited States Bankruptcy Court for the	: WESTERN DISTRICT	OF MICHIGAN		_						
	se number nown)							ed filing ent showir	ng postpetition following date:		
0	fficial Form 106I						MM / DD/ \	YYYY			
S	chedule I: Your Inc	ome								12/15	
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. It 1: Describe Employment Fill in your employment	r spouse is not filing wi	th you, do not inclu	de infor	mati	on abo	ut your spenumber (if	ouse. If m known). <i>I</i>	ore space is Answer every	needed,	
	information.	■ Employed					Debtor 2 or non-filing spouse ☐ Employed				
	If you have more than one job, attach a separate page with information about additional	Employment status	☐ Not employed customer service				☐ Not employed				
	employers.	Occupation									
	Include part-time, seasonal, or self-employed work.	Employer's name	Peckham								
	Occupation may include student or homemaker, if it applies.	Employer's address									
		How long employed to	here? 1 mont	h							
Pa	Give Details About Mor	nthly Income									
	imate monthly income as of the dause unless you are separated.	ate you file this form. If	you have nothing to re	eport for	any	line, wri	te \$0 in the	space. In	clude your no	n-filing	
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the informatio	n for all	empl	oyers fo	r that perso	on on the I	ines below. If	you need	
						For De	ebtor 1		ebtor 2 or ling spouse		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		1,605.89	\$	N/A		
3.	Estimate and list monthly overt		3.	+\$		564.35	+\$	N/A			
4.	Calculate gross Income. Add lir	ne 2 + line 3.		4.	\$	2,	170.24	\$	N/A		

Debt	or 1	Margery Lee Wakefield	_	С	ase number (if ki	nown)				
					For Debtor 1			Debtor 2		
	Cop	by line 4 here	4.		\$2,170).24	\$		N/A	_
5.	List	t all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	ı	\$ 356	6.48	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b			4.35	\$_		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.	. :	. —	0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d	l. :	\$ (0.00	\$		N/A	_
	5e.	Insurance	5e		\$	0.00	\$		N/A	_
	5f.	Domestic support obligations	5f.			0.00	\$		N/A	_
	5g.	Union dues	5g		. ———	0.00	\$_		N/A	_
	5h.	Other deductions. Specify:	5h	.+	\$	0.00	+ \$_		N/A	_
6.	Add	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	(0.83	\$_		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	(1,249	}.41	\$		N/A	<u>-</u>
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a	. :	\$ (0.00	\$		N/A	
	8b.	Interest and dividends	8b	. :		0.00	\$		N/A	=
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	. :	\$	0.00	\$		N/A	_
	8d.	Unemployment compensation	8d	l. :	\$	0.00	\$		N/A	_
	8e.	Social Security	8e		\$ 1,120	3.00	\$		N/A	<u> </u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.			0.00	\$		N/A	_
	8g.	Pension or retirement income	8g			0.00	\$_		N/A	_
	8h.	Other monthly income. Specify:	8h	1.+	\$	0.00	+ \$_		N/A	<u>-</u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,126	3.00	\$_		N/A	A
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	2,375.41	+ \$		N/A	= \$	2,375.41
		If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			2,010111	Ĺ			<u> </u>	2,010111
11.	State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: 11. +\$ 0.00									
12.		d the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certailies						12.	\$Combi	2,375.41 ned
13.	Do :	you expect an increase or decrease within the year after you file this form	?							ly income
		Yes, Explain:								

Official Form 106I Schedule I: Your Income page 2

Eill-	in this informa	tion to identify yo	our case.					
Deb		-		4		O.	a alc if this in:	
Deb	IOI I	Margery Lee	wakefie	a		Che	eck if this is: An amended filing	
	tor 2						A supplement sho	wing postpetition chapter
(Spo	ouse, if filing)							the following date:
Unit	ed States Bankr	uptcy Court for the:	WESTE	RN DISTRICT OF MICHI	GAN		MM / DD / YYYY	
	e number nown)							
└ Of	fficial Fo	rm 106J						
		J: Your I	Exnen	292				12/15
Be a	as complete a	and accurate as	possible. eded, atta	If two married people and the contract of the				or supplying correct
Pari	t 1: Descr Is this a join	ibe Your House	hold					
	No. Go to							
		s Debtor 2 live i	n a separa	ate household?				
		~	st file Officia	al Form 106J-2, <i>Expense</i> s	s for Separate House	hold of De	btor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.			-			Yes
								□ No □ Yes
								□ No
								☐ Yes
								□ No
								☐ Yes
3.		enses include f people other tl	han	No				
		d your depende		Yes				
		ate Your Ongoi						
exp				iptcy filing date unless y y is filed. If this is a supp				apter 13 case to report of the form and fill in the
the	value of such	n assistance and		government assistance i luded it on <i>Schedule I:</i> Y			Your exp	ancoc
(Ott	ficial Form 10	61.)					Tour exp	0011303
4.		or home owners		ses for your residence. I r lot.	nclude first mortgage	4.	\$	704.00
	If not includ	led in line 4:						
		estate taxes				4a.		0.00
		rty, homeowner's				4b.	:	0.00
				pkeep expenses		4c.	:	0.00
5.		owner's associat nortgage payme		ominium dues o ur residence, such as ho	me equity loans	4d. 5.	\$ \$	0.00 0.00

Debtor 1	Margery Lee Wakefield	Case num	ber (if known)	
6. Util	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	100.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
6d.	Other. Specify:	6d.	\$	0.00
7. Fo c	od and housekeeping supplies		\$	400.00
3. Chi	Idcare and children's education costs	8.	\$	0.00
O. Clo	thing, laundry, and dry cleaning	9.	\$	100.00
0. Per	sonal care products and services	10.	\$	100.00
1. Me d	dical and dental expenses	11.	\$	460.00
	nsportation. Include gas, maintenance, bus or train fare.			0.40.00
	not include car payments.	12.	·	246.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	·	100.00
	aritable contributions and religious donations	14.	\$	0.00
5. Ins ı				
	not include insurance deducted from your pay or included in lines 4 or 20.	150	¢	0.00
	Life insurance	15a.	· ·	0.00
	. Health insurance	15b.		0.00
	. Vehicle insurance	15c.	\$	0.00
	Other insurance. Specify:	15d.	\$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20. ecify:	16	¢	0.00
	•	16.	\$	0.00
	tallment or lease payments: . Car payments for Vehicle 1	17a.	\$	0.00
	Car payments for Vehicle 2	17a. 17b.	·	0.00
	. Other. Specify:	176. 17c.	\$	0.00
	Other. Specify:	— 17d. 17d.	*	
	ir payments of alimony, maintenance, and support that you did not report as	17u.	Ψ	0.00
	lucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	er payments you make to support others who do not live with you.		\$	0.00
	cify:	19.	·	
	er real property expenses not included in lines 4 or 5 of this form or on Sche	dule I: Yo	our Income.	
	. Mortgages on other property	20a.		0.00
20b	. Real estate taxes	20b.	\$	0.00
20c	. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d	. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e	. Homeowner's association or condominium dues	20e.	\$	0.00
l. Oth	er: Specify:	21.	+\$	0.00
Cal	oulate value manthly expanses			
	culate your monthly expenses . Add lines 4 through 21.		•	2 240 00
	S .		\$	2,210.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		Ψ	
22c	. Add line 22a and 22b. The result is your monthly expenses.		\$	2,210.00
3. Cal	culate your monthly net income.			
	. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,375.41
	. Copy your monthly expenses from line 22c above.	23b.	· ·	2,210.00
23c	. Subtract your monthly expenses from your monthly income.			405.44
	The result is your monthly net income.	23c.	\$	165.41
	you expect an increase or decrease in your expenses within the year after yo			
	example, do you expect to finish paying for your car loan within the year or do you expect your ification to the terms of your mortgage?	mortgage	payment to increas	e or decrease because of a
1 =				
Пν	voc i Explain pere.			

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Fill	n this information to identify your case:		
Deb	tor 1 Margery Lee Wakefield		
Deh	First Name Middle Name Last Name tor 2		
	se if, filing) First Name Middle Name Last Name		
Unit	ed States Bankruptcy Court for the: WESTERN DISTRICT OF MICHIGAN		
Cas (if kno	e number	_	ck if this is an
		ame	ended filing
∩fí	icial Form 106Sum		
	nmary of Your Assets and Liabilities and Certain Statistical Information		12/15
Be a infor	s complete and accurate as possible. If two married people are filing together, both are equally responsible for mation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
ran	1. Summanze Tour Assets	Varia	
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$ \$	1,430.00
		· —	,
	1c. Copy line 63, Total of all property on Schedule A/B	\$	1,430.00
Part	2: Summarize Your Liabilities		
			liabilities int you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	19,797.00
	Your total liabilities	\$	19,797.00
Part	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,375.41
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,210.00
Part	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur other s	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persona	al, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules.	box and	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Debtor 1 Margery Lee Wakefield

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____348.37

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cl	aim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in this inform	mation to identify your	case:			
Debtor 1	Margery Lee Wak	efield			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT	OF MICHIGAN		
Case number					
(if known)					Check if this is an
					amended filing
You must file thi obtaining money	s form whenever you fi	connection with a ban	s or amended schedu	ıles. Making a false stat	tement, concealing property, or 00, or imprisonment for up to 20
Sign	n Below				
Did you pa	y or agree to pay some	one who is NOT an atto	rney to help you fill ou	ut bankruptcy forms?	
■ No					
☐ Yes. N	Name of person				nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	lty of perjury, I declare e true and correct.	that I have read the sum	mary and schedules	filed with this declarati	on and
X /s/ Mar	gery Lee Wakefield		Х		
Marge	ry Lee Wakefield re of Debtor 1			e of Debtor 2	
Date _	January 2, 2017		Date		

Debtor 1	Margery Lee Wak	efield			
	First Name	Middle Name	Last Name		
Debtor 2 Spouse if, filing)	First Name	Middle Name	Last Name		
Jnited States	Bankruptcy Court for the:	WESTERN DISTRICT OF MICH	HIGAN		
Case number					Check if this is an mended filing
Stateme Se as comple	ete and accurate as possib	le. If two married people are filin	s Filing for Bankruptcy	ible for sup	
umber (if kn	own). Answer every quest		rm. On the top of any additional page	es, write you	or name and case
. What is	your current marital status	?			
☐ Mar	ried				
■ Not	married				
. During t	he last 3 years, have you li	ved anywhere other than where	you live now?		
□ No					
■ Yes	. List all of the places you liv	red in the last 3 years. Do not inclu	de where you live now.		
Debtor	1 Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Address:		Dates Debtor 2 lived there
	alog Street :, MI 48840	From-To: 7-2014 to 4-2016	☐ Same as Debtor 1		☐ Same as Debtor 1 From-To:
	t. Paul Street	From-To: 2007-2014	☐ Same as Debtor 1		☐ Same as Debtor 1 From-To:
no: 25	r, CO 80206				

De	btor 1	Ma	rgery Lee	Wakefield			Cas	e number (if known)		
Pa	rt 2	Exp	lain the So	urces of You	ır Income					
4.	Fill i	n the t	otal amount	of income yo	mployment or from operation received from all jobs and have income that you rece	d all busine	esses, including part	-time activities.	vious calen	dar years?
		No								
		Yes.	Fill in the de	tails.						
					Debtor 1			Debtor 2		
					Sources of income Check all that apply.	(befo	ss income ore deductions and usions)	Sources of incommendation Check all that a		Gross income (before deductions and exclusions)
							,			,
5.	Inclu and winn	other other nings. each s	come regard public benef f you are fili	lless of wheth fit payments; ng a joint cas he gross inco	e during this year or the to ner that income is taxable. E pensions; rental income; in se and you have income that ome from each source sepa	Examples of terest; divinated at you rece	of other income are a dends; money collec- vived together, list it o	alimony; child supported from lawsuits; only once under De	royalties; an ebtor 1.	
					Debtor 1			Debtor 2		
					Sources of income Describe below.	each (befo	is income from a source ore deductions and usions)	Sources of incontrol Describe below.		Gross income (before deductions and exclusions)
			1 of currei iled for bar	nt year until ikruptcy:	Wages & Social Security		\$0.00			
			dar year: December	31, 2016)	Wages & Social Security		\$15,603.00			
			dar year be December		Wages & Social Security		\$27,912.00			
Pa	rt 3:	List	Certain Pa	yments You	Made Before You Filed fo	or Bankruj	ptcy			
6.	Are □	eithe r No.	Neither De	ebtor 1 nor E	's debts primarily consun Debtor 2 has primarily con personal, family, or housel	sumer de	bts. Consumer debt	s are defined in 11	U.S.C. § 10	1(8) as "incurred by an
			□ No.	Go to line 7		, ,		. ,		
			☐ Yes	paid that cr	each creditor to whom you peditor. Do not include payme payments to an attorney fo	nents for do	omestic support oblig			
		Voo	•	•	t on 4/01/19 and every 3 ye			or after the date of	f adjustment	
	_	165.			ore you filed for bankruptcy,			I of \$600 or more?		
			No.	Go to line 7						
			□ _{Yes}	include pay	each creditor to whom you prents for domestic support this bankruptcy case.					
	Cre	ditor'	s Name and	d Address	Dates of payr	ment	Total amount paid	Amount you still owe	Was this p	payment for

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Case number (if known)

7.	Within 1 year before you filed for bankrupter Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	ortners; relatives of any gene control, or owner of 20% or	eral partners; partner more of their voting	rships of which you	ou are a genera ny managing a	al partner; corporations gent, including one for
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
3.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos		ments or transfer a	ny property on a	ccount of a de	ebt that benefited an
	No					
	☐ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
			paid	still owe	include cred	itor's name
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
).	Within 1 year before you filed for bankruptor. List all such matters, including personal injury modifications, and contract disputes. No Yes, Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the case	
	LAFCU v Margery L. Wakefield 16-1410-GC	Civil Suit	55th District Court 700 Buhl Ave. Mason, MI 48854		☐ Pending☐ On appeal☐ Concluded	
					Judgment	- Civil
0.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address		rty repossessed, fo	oreclosed, garnis	shed, attached	I, seized, or levied? Value of the
		Explain what happened				property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details.	otcy, did any creditor, incl		ancial institution	n, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount
2.	Within 1 year before you filed for bankruptcourt-appointed receiver, a custodian, or a ■ No □ Yes		rty in the possessi			efit of creditors, a

Debtor 1 Margery Lee Wakefield

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Deb	otor 1 Margery Lee Wakefield	Case number	(if known)	
	List Outsin Office and Outsite time			
Par	t 5: List Certain Gifts and Contributions			
3.	■ No	ey, did you give any gifts with a total value of more t	than \$600 per person	?
	Yes. Fill in the details for each gift.	Department of the settle	D-1	Walasa
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
4.	No No	cy, did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or contr			
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses			
5.	Within 1 year before you filed for bankruptcy or gambling?	or since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster
	■ No			
	Yes. Fill in the details.			
		scribe any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred Inc	lude the amount that insurance has paid. List pending urance claims on line 33 of Schedule A/B: Property.	loss	lost
Par	t 7: List Certain Payments or Transfers			
	Within 1 year before you filed for bankruptcy consulted about seeking bankruptcy or prepared include any attorneys, bankruptcy petition prepared in No	r, did you or anyone else acting on your behalf pay paring a bankruptcy petition? arers, or credit counseling agencies for services require		rty to anyone you
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Scott Marshall Neuman, P.C. 2196 Commons Parkway Okemos, MI 48864 xneumanx@aol.com	Attorney Fees		\$675.00
	Pioneer Credit Counseling P.O. Box 6860 1644 Concourse Dr. Rapid City, SD 57709	Bankruptcy Education		\$22.00

Debtor 1	Margery	l ee V	Vakefie	٦ld
	IVIAI UEI V	FCC A	vanciie	įΙV

Case number (if known)

17.	Within 1 year before you filed for bankruptcy, or promised to help you deal with your creditors. Do not include any payment or transfer that you like	or to make payments			or transfer any proper	ty to anyone who				
	No									
	Yes. Fill in the details.									
	Person Who Was Paid Address	Description and vatransferred	alue of any prop	erty	Date payment or transfer was made	Amount of payment				
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?									
	Include both outright transfers and transfers made include gifts and transfers that you have already line. No		ne granting of a se	ecurity intere	st or mortgage on your	ргорепу). Do not				
	☐ Yes. Fill in the details.									
	Person Who Received Transfer Address	Description and value of property transferred payments received paid in exchange				Date transfer was made				
	Person's relationship to you									
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No									
	Yes. Fill in the details.									
	Name of trust Description and value of the property transferred				red	Date Transfer was made				
Par	t 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and Stor	age Units						
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associa No	other financial accoun	ts; certificates o	of deposit; s		, ,				
	Yes. Fill in the details.									
		ast 4 digits of ccount number	Type of account instrument	cle m	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer				
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?									
	■ No									
	☐ Yes. Fill in the details.									
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acco Address (Number, St State and ZIP Code)		Describe the	contents	Do you still have it?				
22.	Have you stored property in a storage unit or p	place other than your	home within 1 y	ear before y	ou filed for bankruptc	y?				
	■ No									
	☐ Yes. Fill in the details.									
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		Describe the	contents	Do you still have it?				
		•								

Debtor 1	Margery	مم ا	Wakat	اماط
Jebioi i	waruerv	Lee	wakei	ileid

Case number (if known)

Par	19: Identify Property You Hold or Control for	Someone Else								
23.	to you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust or someone.									
	■ No □ Yes. Fill in the details.									
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Des	scribe the property	Value					
Par	10: Give Details About Environmental Inform	nation								
For	he purpose of Part 10, the following definitions	s apply:								
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.									
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.									
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.									
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n the	y occurred.						
24.	las any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?									
	■ No □ Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of any release of hazardous material?									
	■ No □ Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.									
	■ No □ Yes. Fill in the details.									
	Case Title	Court or agency	Nat	ture of the case	Status of the					
	Case Number	Name Address (Number, Street, City, State and ZIP Code)			case					
Par	11: Give Details About Your Business or Co	nnections to Any Business								
27.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?									
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time									
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)									
	☐ A partner in a partnership									
	☐ An officer, director, or managing executive of a corporation									
	☐ An owner of at least 5% of the voting or equity securities of a corporation									

Official Form 107

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Debtor 1 Margery Lee Wakefield		Case number (if known)		
■ No. None of the above applies. Go to	Part 12.			
☐ Yes. Check all that apply above and f	ill in the details below for each business.			
Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.		
		Dates business existed		
 28. Within 2 years before you filed for bankruinstitutions, creditors, or other parties. No Yes. Fill in the details below. 	ptcy, did you give a financial statement to	anyone about your business? Include all financial		
Name Address (Number, Street, City, State and ZIP Code)	Date Issued			
Part 12: Sign Below				
	a false statement, concealing property, or	I declare under penalty of perjury that the answers obtaining money or property by fraud in connection years, or both.		
Margery Lee Wakefield	Signature of Debtor 2			
Signature of Debtor 1				
Date January 2, 2017	Date			
Did you attach additional pages to Your Statem No ☐ Yes	nent of Financial Affairs for Individuals Fil	ling for Bankruptcy (Official Form 107)?		
Did you pay or agree to pay someone who is n ■ No	ot an attorney to help you fill out bankrup	tcy forms?		
☐ Yes. Name of Person Attach the Bank	ruptcy Petition Preparer's Notice, Declaration	a, and Signature (Official Form 119).		

08/12

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF MICHIGAN

In re:	Case No.							
	Margery Lee Wakefield		Chapter 7					
	Debtor(s).		/					
	ASSET PROTECTION REPORT							
	Pursuant to Local Bankruptcy Rule 1007-2(d), debtors filing a Chapter 7 petition and debtors in a case converting to Chapter 7 must file an Asset Protection Report. List below any property referenced on Schedule D (Creditors Holding Secured Claims); or Schedule G (Executory Contracts and Unexpired Leases); and any insurable asset in which there is nonexempt equity. For each asset listed, provide the following information regarding property damage or casualty insurance:							
	INSURABLE ASSET (from schedules)	IS ASSET INSURED? (Yes/No)	NAME & ADDRESS OF AGENT OR INSURANCE CO.	POLICY EXPIRATION DATE (MM/YYYY)	WILL DEBTOR RENEW INSURANCE ON EXPIRATION? (Yes/No)			
NONE	•							
	If the debtor is self-employed, does the debtor have general liability insurance for business activities? Yes \(\) No \(\) I declare, under penalty of perjury, that the above information is true and accurate to the best of my knowledge. I intend to provide insurance protection for any exemptible interests in real or personal property of the estate, and I request that the trustee not expend estate funds to procure insurance coverage for my exemptible assets.							
Dated:	January 2, 2017		/s/ Margery Lee W		rgery Lee Wakefield Debtor			
	Pursuant to LBR 1007-2(f), debtor is required to provide the trustee with a copy of the Declarations Page							

Pursuant to LBR 1007-2(f), debtor is required to provide the trustee with a copy of the Declarations Page for any insurance policy covering an insurable asset at least 7 days before the date first set for the meeting of creditors